

299 Van Deren, Suite 2
Sedona, AZ 86336
Tel: 928-204-1238
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DRIVER INFORMATION

It is policy that anyone using a vehicle while performing volunteer services have the following information on file:

DRIVER'S LICENSE # AND STATE _____
DATE OF EXPIRATION _____

AUTOMOBILE INSURANCE CARRIER _____
DATE OF EXPIRATION OF COVERAGE _____

Please note:

Unless we hear from you that you have changed insurance carriers and/or that your driver's license is invalid, we will assume that you continue to be licensed and insured.

Signature _____ Date _____